

Amendment No. 2 to HB1207

Sexton C
Signature of Sponsor

AMEND Senate Bill No. 1041*

House Bill No. 1207

by inserting the following new section immediately preceding the last section and renumbering the subsequent section accordingly:

SECTION _____. Tennessee Code Annotated, Title 68, Chapter 1, Part 8, is amended by adding the following as a new section:

On or before January 15, 2018, the commissioner of health, in consultation with the perinatal advisory committee and with the assistance of relevant state agencies, shall report to the health committee of the house of representatives and the health and welfare committee of the senate concerning the following aspects of births involving neonatal abstinence syndrome and opioid abuse by women of childbearing age for the last two (2) available fiscal years or calendar years, as may be available:

(1) From data available to the bureau of TennCare, the number of births involving neonatal abstinence syndrome to enrollees in the TennCare program, the lengths of stay in a hospital for infants born with neonatal abstinence syndrome to enrollees in the TennCare program, and the costs to the program of those births;

(2) From information available to managed care organizations participating in the TennCare program, a description of any initiatives by the managed care organizations to address health outcomes, costs, and other issues raised by births involving neonatal abstinence syndrome and opioid abuse by women of childbearing age;

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(3) From data available to the department of health, and district and county health departments, the number of women with a substance abuse diagnosis involving opioid abuse who received family planning services and the number of those women who received long acting reversible contraceptives;

(4) From data available to the department of children's services, the number of cases involving investigations that included an infant born with neonatal abstinence syndrome, the number of such infants in custody of the department, and the number of visits made by the department to families with an infant born with neonatal abstinence syndrome; and

(5) From data available to the bureau of TennCare and the controlled substance database committee, the number of cases in which the source of opiates in the mother of an infant born with neonatal abstinence syndrome can be reasonably associated with an identifiable prescriber.